

Fill in this information to identify the case:

Debtor 1

First Name

Middle Name

Last Name

Adrian Cabrera

Debtor 2

(Spouse, if filing) First Name

Middle Name

Last Name

United States Bankruptcy Court for the District of New Mexico

Case number: # 21-11143-513

FILED
at 12:28 o'clock P M

JUN 23 2023

United States Bankruptcy Court
Albuquerque, New Mexico

Form 1340 (12/19)

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

1. Claim Information

For the benefit of the Claimant(s)¹ named below, application is made for the payment of unclaimed funds on deposit with the court. I have no knowledge that any other party may be entitled to these funds, and I am not aware of any dispute regarding these funds.

Note: If there are joint Claimants, complete the fields below for both Claimants.

Amount:

Claimant's Name:

Claimant's Current Mailing
Address, Telephone Number,
and Email Address:

2407 Lingo Rd NW
Albuquerque NM 87107

2. Applicant Information

Applicant² represents that Claimant is entitled to receive the unclaimed funds because (check the statements that apply):

- ☒ Applicant is the Claimant and is the Owner of Record³ entitled to the unclaimed funds appearing on the records of the court.
- ☐ Applicant is the Claimant and is entitled to the unclaimed funds by assignment, purchase, merger, acquisition, succession or by other means.
- ☐ Applicant is Claimant's representative (e.g., attorney or unclaimed funds locator).
- ☐ Applicant is a representative of the deceased Claimant's estate.

3. Supporting Documentation

- ☒ Applicant has read the court's instructions for filing an Application for Unclaimed Funds and is providing the required supporting documentation with this application.

¹ The Claimant is the party entitled to the unclaimed funds.

² The Applicant is the party filing the application. The Applicant and Claimant may be the same.

³ The Owner of Record is the original payee.

4. Notice to United States Attorney

☒ Applicant has sent a copy of this application and supporting documentation to the United States Attorney, pursuant to 28 U.S.C. § 2042, at the following address:

Office of the United States Attorney
District of New Mexico
PO Box 607
Albuquerque, NM 87103

5. Applicant Declaration

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: 5/10/23

Adan Cabrera Mercedes Vazquez
Signature of Applicant de Cabrera

Adan Cabrera Mercedes Vazquez
Printed Name of Applicant de Cabrera

Address: 2407 El Hego Rd NW
Alb NM 87107

Telephone: (505) 987-6543

Email: 1248nm@gmail.com

5. Co-Applicant Declaration (if applicable)

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: _____

Signature of Co-Applicant (if applicable) _____

Printed Name of Co-Applicant (if applicable) _____

Address: _____

Telephone: _____

Email: _____

6. Notarization

STATE OF New Mexico

COUNTY OF Bernalillo

This Application for Unclaimed Funds, dated 5/10/2023 was subscribed and sworn to before me this 10 day of May, 2023 by

Adan Cabrera
who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

(SEAL) Notary Public Marilyn Gallegos

My commission expires 2/3/2024

STATE OF NEW MEXICO

NOTARY PUBLIC

Marilyn Gallegos

Commission No. 1114182

February 03, 2024

6. Notarization

STATE OF _____

COUNTY OF _____

This Application for Unclaimed Funds, dated _____ was subscribed and sworn to before me this _____ day of _____, 20____ by

who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

(SEAL) Notary Public _____

My commission expires: _____